Chapter 13 Section 9.1 Addendum 1, Section 6

TRICARE-Approved Ambulatory Surgery Procedures - Hemic And Lymphatic System

The number following the procedure code is the TRICARE payment group.

LYMPH NODES AND LYMPHATIC CHANNELS

PROCEDURE	Payment		
CODE		OUP DESCRIPTION	
INCISION			
38300	2	Drainage of lymph node abscess or lymphadenitis; simple	
38305	4	Drainage of lymph node abscess or lymphadenitis; extensive	
38308	4	Lymphangiotomy or other operations on lymphatic channels	
EXCISION			
38500	3	Biopsy or excision of lymph node(s); superficial (separate procedure)	
38505	2	Biopsy or excision of lymph node(s); by needle, superficial (eg, cervical, inguinal, axillary)	
38510	5	Biopsy or excision of lymph node(s); deep cervical node(s)	
38520	4	Biopsy or excision of lymph node(s); deep cervical node(s) with excision scalene fat pad	
38525	6	Biopsy or excision of lymph node(s); deep axillary node(s)	
38530	4	Biopsy or excision of lymph node(s); internal mammary node(s) (separate procedure)	
38542	4	Dissection; deep jugular node(s)	
38550	5	Excision of cystic hygroma, axillary or cervical, without deep neurovascular dissection; simple	
38555	6	Excision of cystic hygroma, axillary or cervical, without deep neurovascular dissection; complex	
RADICAL LYMPHADENECTOMY (RADICAL RESECTION OF LYMPH NODES)			
38700	4	Suprahyoid lymphadenectomy	
38740	4	Axillary lymphadenectomy; superficial	
38745	6	Axillary lymphadenectomy; complete	
38760	4	Inguinofemoral lymphadenectomy, superficial, including Cloquet's node (separate procedure)	
INTERPORT LOTTON			

INTRODUCTION

38790 2 Injection procedure for lymphangiography

Except as provided below, all procedures are effective as of November 1, 1994

- 1 Code added for services performed on or after January 1, 1995
- ² Code added for services performed on or after February 27, 1995
- ³ Code deleted for services performed on or after April 1, 1995
- ⁴ Code deleted for services performed on or after April 26, 1995

TRICARE-APPROVED AMBULATORY SURGERY PROCEDURES - HEMIC AND LYMPHATIC SYSTEM

- ⁵ Payment group changed for services performed on or after February 27, 1995
- ⁶ Code added October 1995 effective for services performed on or after November 1, 1994
- ⁷ Code deleted for services performed on or after March 31, 1996
- ⁸ Code added for services performed on or after January 1, 1996
- ⁹ Code added for services performed on or after January 1, 1997
- 10 Code deleted for services performed on or after January 1, 1997
- ¹¹ Code added for services performed on or after November 1, 1998
- 12 Code deleted for services performed on or after January 1, 2000
- ¹³ Code added for services performed on or after January 1, 2000